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| | ild Yes No W | Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "ves" unless you have first consulted with the Committee on Ethics. | e you excluded from this report any other assets, "unearned" ause they meet all three tests for exemption? Do not answer | Exemptions Have been | |
|--------|--|--|---|--|--------|
| | Yes No 🗸 | ttee on Ethics and certain other "excepted trusts" need not be ust benefiting you, your spouse, or dependent child? | Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" ne disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? | Trusts- Del | |
| | STIONS | IATION ANSWER EACH OF THESE QUESTIONS | SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWEI | EXCLUSION OF S | i i |
| | 2 | schedule attached for each "Yes" response. | tach Schedule V. | If yes, complete and attach Schedule V | |
| | and the appropriate | Each question in this part must be answered and the appropriate | Did you, your spouse, or a dependent child have any reportable liability {more than \$10,000} during the reporting period? | Did you, your spouse, or a dependent child have V. (more than \$10,000) during the reporting period? | - |
| | | If yes, complete and attach Schedule IX. | tach Schedule IV. | If yes, complete and attach Schedule IV. | |
| | utside Yes No | Did you have any reportable agreement or arrangement with an outside IX. entity? | Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting Yes No | IV. reportable asset in a trans | |
| | | If yes, complete and attach Schedule VIII. | tach Schedule III. | If yes, complete and attach Schedule III. | |
| | ng in the Yes ✓ No ☐ | Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year? | Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth Yes V No more than \$1,000 at the end of the period? | Did you, your spouse, or a dependent child III. more than \$200 in the reporting period or homore than \$1,000 at the end of the period? | |
| | | If yes, complete and attach Schedule VII. | tach Schedule II. | If yes, complete and attach Schedule II. | |
| | e travel or an \$335 Yes No | Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$335 from one source)? | Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes No | Did any individual or orga II. you for a speech, appears | _ |
| | | If yes, complete and attach Schedule VI. | tach Schedule 1. | If yes, complete and attach Schedule i. | |
| | egift in herwise Yes 🗌 No 🗸 | Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? | Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? | Did you or your spouse have "earned" income (e. I. or more from any source in the reporting period? | |
| | | QUESTIONS | ORMATION ANSWER EACH OF THESE QUESTIONS | PRELIMINARY INFORMATION | ا نے ا |
| | more than 30 days late. | Termination Date: | Annual (May 15) Amendment Termination | Report An | |
| | A \$200 penalty shall be assessed against anyone who files | Employee Employee | ntatives District: | Filer Hou | |
| | | | Member of the ITS State: HI | - 1 | _ |
| 757 | U.S. HOUSONICE USE ON WITH S | (Daytime Telephone) U.S | (Full Name) | | |
| Na | 2011 MAY 12 PM 2: 59 | 2022252726 | Colleen Hanabusa | | |
| • | HST ATTYE RESOURCE CHAIL. | L | S - HONGIST DISCELLANCE OF STEMPINE | טארבואטאוא זי באוי אי | |
| į Ę | | FORM A Page 1 of 6 For use by Members, officers, and employees | UNITED STATES HOUSE OF REPRESENTATIVES | UNITED STATE | |
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SCHEDULE I - EARNED INCOME

Name Colleen Hanabusa

Page 2 of 6

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

| | Source | Туре | Amount |
|---|--|---------------------|-----------|
| State of Hawaii, Honolulu, HI Legislative Salary \$47,092 | State of Hawaii, Honolulu, HI | Legislative Salary | \$47,092 |
| Colleen Hanabusa LLC, Honolulu HI (Law Gross Income \$103,243 firm closed as of 12/31/10) | Colleen Hanabusa LLC, Honolulu HI (Law firm closed as of 12/31/10) | Gross Income | \$103,243 |
| State of Hawaii Employee Retirement Spouse's Retirement N/A System | State of Hawaii Employee Retirement System | Spouse's Retirement | N/A |

| SCHEDULE III |
|--------------|
| - ASSETS AN |
| ND "UNEARNE |
| :D" INCO |

| ט כי ור | SCHEDOLE III - VASELA VIID. ONESKINED. INCOME | Name Colleen Hanabusa | lanabusa | | Page 3 of 6 |
|--|--|---|--|---|--|
| | BLOCK A | вгоск в | вгоск с | BLOCK D | BLOCK E |
| ASS Identify (a) e a fair market and (b) any c generated m | Asset and/or income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. | Year-End Value of Asset at close of reporting year. If you use a | Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose | Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income | Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) |
| Provide complet symbols.) For all IRAs and self-directed (i.e. exercised, to self asset held in the retirement account of the institution reporting period. For rental or other symbols. | Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete | other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None." | that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period. | RAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated. | \$1,000 in reporting year. |
| For an owner publically transcrivities, an | For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A. | | | | |
| vacation hon | Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting | | | , | |
| SP | Central Pacific Bank Account, Honolulu, HI | \$250,001 - \$500,000 | INTEREST | \$1,001 - \$2,500 | |
| JT | Central Pacific Checking Account, Honolulu, HI | \$1 - \$1,000 | INTEREST | \$1 - \$200 | |
| JT | Central Pacific Savings Account, Honolulu, HI | \$1,001 - \$15,000 | INTEREST | \$1 - \$200 | |
| SP | First Hawaiian Bank Account, Honolulu, HI IRA Money Market | \$100,001 - \$250,000 | INTEREST | \$2,501 - \$5,000 | |
| SP | First Hawaiian Bank Checking Account, Honolulu, Hawaii | \$15,001 - \$50,000 | None | NONE | |
| SP | First Hawaiian Bank IRA Money Market, Honolulu, HI | \$50,001 - \$100,000 | INTEREST | \$1,001 - \$2,500 | |

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

SP SP SP SP SP 92-414 Farrington Hwy, Pueo Trucking LLC, Honolulu, Pueo Enterprises LLC land: estate rentals) Honolulu, HI (truck/equipment and real Pueo Enterprises LLC cash - Honolulu, HI Class A&B stock - closed corp. Hanabusa Limited Partnership Kapolei, Hawaii Lenakona Development, Ltd. Waianae, Hawaii (16%) land: 85-923 Farrington Hwy, Money Market, Honolulu, Hi First Hawaiian Bank SEP/IRA First Hawaiian Bank Savings -\$250,001 -\$500,000 \$100,001 -\$250,000 \$15,001 -\$50,000 \$15,001 -\$500,000 \$250,001 -\$500,000 \$250,001 -\$50,000 \$50,000 \$15,001 -Name Colleen Hanabusa None RENT Note Receivable None None DIVIDENDS/CAPI TAL GAINS INTEREST \$100,001 -\$1,000,000 NONE NONE NONE \$1,000,000 \$100,001 -\$1 - \$200 \$1 - \$200 Page 4 of 6

SCHEDULE V - LIABILITIES

Name Colleen Hanabusa

Page 5 of 6

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

| | SP, DC, JT |
|------------------------------------|-------------------------------|
| Central Pacific Bank, Honolulu, HI | Creditor |
| : | Date Liability Incurred |
| Personal Line of Credit | Type of Liability |
| \$100,001 - \$250,000 | Amount of Liability |

SCHEDULE VIII - POSITIONS

Name Colleen Hanabusa

Page 6 of 6

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any honorary nature; and positions listed on Schedule I. educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an

| Colleen Hanabusa LLC (Law Firm) Hanabusa Limited Partnership Hanabusa, Inc. (Managing Entity - Hanabusa, Inc. (Managing Entity - Hanabusa) | Position | Name of Organization |
|--|--------------------|---|
| | Member Manager | Colleen Hanabusa LLC (Law Firm) |
| | Limited Partner | Hanabusa Limited Partnership |
| | President/Director | Hanabusa, Inc. (Managing Entity - Hanabusa Limited Parntership - uncompensated) |
| | President/Director | CRC, Inc., Honolulu, HI - closed 5/03 |